

Specimen Collection and Submission Instructions

Francisella tularensis (Version 1)

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Specimen Type	Collection Time	Collection Frequency	Collection Procedures	Transport Media	Shipping & Handling (S&H)**
Pure culture / Isolated colony	NA	NA	Use chocolate agar plate / slant, or media supplemented with cysteine.	NA	<ul style="list-style-type: none">• Transport device: See Collection Procedures.• Transport & Storage: Room temperature.
Tissue (biopsy or scraping of an ulcer)	At illness		Collect tissue into a sterile container, and keep moist with 1-2 drops of normal saline (0.9% w/v NaCl).	Amies transport media	<ul style="list-style-type: none">• Transport device: See Collection Procedures.• Transport: Ship cold (2-8°C) on ice packs.• Storage: Refrigerate at 2-8°C.
Tissue (Swab)			<ul style="list-style-type: none">• Obtain a firm sample of the advancing margin of the lesion.• If using a swab transport carrier, the swab should be reinserted into the transport package and the swab fabric moistened with the transport medium inside the packet.	NA	<ul style="list-style-type: none">• Transport device: Sterile leak-proof container.• Transport: Ship cold (2-8°C) on ice packs. Room temperature is acceptable.• Storage: If transport of specimen is delayed, keep specimen refrigerated at 2-8°C.
Whole blood / Serum (PCR only)			≤4 days post symptom onset	Collect into lavender-top EDTA collection tubes.	NA
Aspirate (Lymph node or lesion) / Bone marrow	At illness		Collect into sterile container.	NA	<ul style="list-style-type: none">• Transport device: Sterile leak-proof container.• Transport: Ship cold (2-8°C) on ice packs.• Storage: Refrigerate at 2-8°C.

General Rejection Criteria (for additional details, see S&H)

- Unaccepted specimen type.
- Not refrigerated or frozen properly.
- Insufficient specimen volume.
- Leaky specimen.
- Swab on wooden shaft.
- Did not obtain LHJ or DOH CDE approval.
- Failure to follow specific S&H requirements.

NOTE:

Specimens will not be processed until ALL of the following information are provided on requisition form:

- Patient name, patient's county of residence, and second identifier.
- Two matching identifiers on both the tube and the laboratory requisition form.
- Specimen type, date of collection, and test requested.
- Submitter name, address, and telephone/FAX numbers.

Collection kit availability

Not available.

Comments